Effective October 1, 2000													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			15				RA	E	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASK	FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			// minus 20=		. 0		XS	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			が minus 3 =		2		- X40	X40=		OR	X80=	160	
ML	LTIPLE DEPEN	IDENT CLAIM P	RESENT				+13	 5=		OR	+270=	70-	
- 11	the difference	in column 1 is	less than zero, enter "0" in column 2			olumn 2	TOT	AL		OR	TOTAL	870	
CLAIMS AS AMENDED - PART II 9-29 05 (Column 1) (Column 2) (Column 3)									ENTITY	or	OTHER SMALL	THAN	
ENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER SUSLY	PRESENT EXTRA	RAT		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT A	Total	-14	Minus	-24	2)	-	X\$) =		OR	X\$18=		
	Independent	. 5	Minus	2	5		X40	П		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+13)= 		OR	+270=		
								TAL		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colur	nn 2)	(Column 3)	ADDIT.	ree (AUDII. FEEI		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIC PAID	BER OUSLY	PRESENT EXTRA	PAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus			8	X\$ 9	=		OR	X\$18=		
	Independent -	NTATION OF MU	Minus	***	CI AIM	•	X40	=		OR	X80=		
	rinal rhese	NIATION OF MIC	LIPLE DE	ENDENT	CLAIM		+135			OR	+270=		
								IAL EE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colun		(Column 3)	ı <u>—</u> —						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER SUSLY	PRESENT EXTRA	RATI		ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE	
	Total ·	•	Minus	••		8	X\$ 9	-		OR	X\$18=	ï	
	Independent	•	Minus	***			X40-	. 1		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1			.070		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Huthest Number Proviously Paid For" IN THUS SPACE is less than 20, enter "20." **OPT SEE													
•••	f the "Highest Nu	mber Previously Pa ber Previously Pai	d For IN THI	S SPACE I	e tess the	n 3, enter "3."	ADDI 1. F		لسيسا	•	ADDIT. FEE		

Application or Docket Number